


*RETURN TO FMF - LOCATION 7540

Re-Edit

QUERY CONTROL FORM		RTIS USE ONLY	
Application No. <u>10/083, 1685</u>	Prepared by <u>RWP</u>	Tracking Number Week Date	
Examiner-GAU <u>Barbara P. Budio-</u>	Date <u>5-20-04</u>		
<u>16/6</u>	No. of queries <u>(1) (1)</u>		

JACKET			
a. Serial No.	f. Foreign Priority	k. Print Claim(s)	p. PTO-1449
b. Applicant(s)	g. Disclaimer	l. Print Fig.	q. PTOL-85b
c. Continuing Data	h. Microfiche Appendix	m. Searched Column	r. Abstract
d. PCT	i. Title	n. PTO-270/328	s. Sheets/Figs
e. Domestic Priority	j. Claims Allowed	o. PTO-892	t. Other

SPECIFICATION	MESSAGE	
a. Page Missing	<p><u>Improper Dependency - Final claim 11</u> <u>(original claim 10) depends on higher claim 12.</u> <u>Please resolve.</u></p> <p style="text-align: right;"><u>Thanks</u></p>	
b. Text Continuity		
c. Holes through Data		
d. Other Missing Text		
e. Illegible Text		
f. Duplicate Text		
g. Brief Description		
h. Sequence Listing		
i. Appendix		
j. Amendments		
k. Other		
CLAIMS		initials <u>RWP</u>
a. Claim(s) Missing		<p>RESPONSE <u>Corrected</u></p>
<u>(b)</u> Improper Dependency		
c. Duplicate Numbers		
d. Incorrect Numbering		
e. Index Disagrees		
f. Punctuation		
g. Amendments		
h. Bracketing	initials	
i. Missing Text		
j. Duplicate Text		
k. Other		

Issue Classification 	Application No.	Applicant(s)	
	10/083,685	HEGELE-HARTUNG ET AL.	
	Examiner	Art Unit	
	Barbara P. Badio, Ph.D.	1616	

ISSUE CLASSIFICATION									
ORIGINAL					CROSS REFERENCE(S)				
CLASS		SUBCLASS		CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)				
514		510		514	718				
INTERNATIONAL CLASSIFICATION				560	231				
A	6	1	K	31/215	568	663	715		
A	6	1	K	31/075	552	626			
C	0	7	C	69/02					
C	0	7	C	43/20					
				/					
(Assistant Examiner) (Date) (Legal Instruments Examiner) (Date)					<i>Barbara P. Badio</i> BARBARA P. BADIO, PH.D. PRIMARY EXAMINER (Primary Examiner) 4/14/04			Total Claims Allowed: 27	
								O.G. Print Claim(s)	O.G. Print Fig.
								1	0

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant				<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original
1	1		31		61		121		181
2	2		32		62		122		182
3	3		33		63		123		183
4	4		34		64		124		184
6	5		35		65		125		185
7	6		36		66		126		186
8	7		37		67		127		187
9	8		38		68		128		188
10	9		39		69		129		189
11	10		40		70		130		190
12	11		41		71		131		191
13	12		42		72		132		192
14	13		43		73		133		193
15	14		44		74		134		194
16	15		45		75		135		195
17	16		46		76		136		196
18	17		47		77		137		197
19	18		48		78		138		198
20	19		49		79		139		199
21	20		50		80		140		200
22	21		51		81		141		201
23	22		52		82		142		202
24	23		53		83		143		203
25	24		54		84		144		204
26	25		55		85		145		205
27	26		56		86		146		206
28	27		57		87		147		207
29	28		58		88		148		208
30	29		59		89		149		209
	30		60		90		150		210